Financial Services Payroll Services

Phone: 473-5757 or 1-866-473-5757

Payroll: Option 2, Fax: 473-6414



CANADA SAVINGS PLAN

Cancellation, Suspension, or Increase/Decrease of Deduction Amount

EMPLOYEE	INFORMATION				
	Employee Name: Department: S.I.N. # Employee I.D. #				
OPTION 1:	CANCELLATION C	OF PLAN DEDUCTI	<u>ONS</u>		
REASO	N: Retiring		Other		
	Resigning				
	SUSPENSION OF P		_		
REASO			_	oorary (Personal Choice)	
OPTION 3: INCREASE/DECREASE OF PLAN DEDUCTION AMOUNT Deduction amount per pay:					
OPTION 4:	PTION 4: REINSTATEMENT OF PLAN DEDUCTION				
	Effective Date: _				
* <u>NOTE</u>	You can increase/decrease your deduction amount per pay at any time. You will receive statements in June and December, showing what has been deducted from your pay and the interest you have earned.				
EMPLOYEE	SIGNATURE:		DAT	E:	